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PTO/SB/05 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

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<b>UTILITY PATENT APPLICATION TRANSMITTAL</b>		Attorney Docket No. LEDER-0001-D01	
		First Inventor Heike PAHL	
		Title PRV-1 GENE AND THE USE THEREOF	
(Only for new nonprovisional applications under 37 C.F.R. 1.53(b))		Express Mail Label No.	

<b>APPLICATION ELEMENTS</b> <i>See MPEP chapter 600 concerning utility patent application contents.</i> 1. <input checked="" type="checkbox"/> Fee Transmittal Form (e.g., PTO/SB/17) <i>(Submit an original and a duplicate for fee processing)</i> 2. <input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27. 3. <input checked="" type="checkbox"/> Specification [Total Pages <u>21</u> ] <i>(preferred arrangement set forth below)</i> <ul style="list-style-type: none"><li>- Descriptive title of the invention</li><li>- Cross References to Related Applications</li><li>- Statement Regarding Fed sponsored R &amp; D</li><li>- Reference to sequence listing, a table, or a computer program listing appendix</li><li>- Background of the Invention</li><li>- Brief Summary of the Invention</li><li>- Brief Description of the Drawings (if filed)</li><li>- Detailed Description</li><li>- Claim(s)</li><li>- Abstract of the Disclosure</li></ul> 4. <input checked="" type="checkbox"/> Drawing(s) (35 U.S.C. 113) [Total Sheets <u>2</u> ] 5. Oath or Declaration [Total Pages <u>  </u> ] <ul style="list-style-type: none"><li>a. <input type="checkbox"/> Newly executed (original or copy)</li><li>b. <input checked="" type="checkbox"/> Copy from a prior application (37 CFR 1.63 (d)) <i>(for a continuation/divisional with Box 18 completed)</i></li><li>i. <input type="checkbox"/> <b>DELETION OF INVENTOR(S)</b> Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</li></ul> 6. <input type="checkbox"/> Application Data Sheet. See 37 CFR 1.76	<b>ADDRESS TO:</b> Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 7. <input type="checkbox"/> CD-ROM or CD-R in duplicate, large table or Computer Program <i>(Appendix)</i> 8. Nucleotide and/or Amino Acid Sequence Submission <i>(if applicable, all necessary)</i> <ul style="list-style-type: none"><li>a. <input type="checkbox"/> Computer Readable Form (CRF)</li><li>b. Specification Sequence Listing on:<ul style="list-style-type: none"><li>i. <input type="checkbox"/> CD-ROM or CD-R (2 copies); or</li><li>ii. <input checked="" type="checkbox"/> paper</li></ul></li><li>c. <input type="checkbox"/> Statements verifying identity of above copies</li></ul> <b>ACCOMPANYING APPLICATIONS PARTS</b> 9. <input type="checkbox"/> Assignment Papers (cover sheet & document(s)) 10. <input type="checkbox"/> 37 C.F.R. §3.73(b) Statement <input type="checkbox"/> Power of Attorney <i>(when there is an assignee)</i> 11. <input type="checkbox"/> English Translation Document <i>(if applicable)</i> 12. <input checked="" type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations 13. <input checked="" type="checkbox"/> Preliminary Amendment 14. <input type="checkbox"/> Return Receipt Postcard (MPEP 503) <i>(Should be specifically itemized)</i> 15. <input type="checkbox"/> Certified Copy of Priority Document(s) <i>(if foreign priority is claimed)</i> 16. <input type="checkbox"/> Request and Certification under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. 17. <input type="checkbox"/> Other: _____
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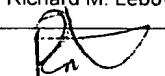
  

<b>18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:</b>	
<input type="checkbox"/> Continuation <input checked="" type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) <i>Prior application information:</i> Examiner <u>E. Kemmerer</u>	of prior application No: <u>09 / 830.189</u> Group / Art Unit: <u>1646</u>
For CONTINUATION or DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying or divisional application and is hereby incorporated by reference. The incorporation <u>can only</u> be relied upon when a portion has been inadvertently omitted from the submitted application parts.	

<b>17. CORRESPONDENCE ADDRESS</b>		
<input checked="" type="checkbox"/> Customer Number or Bar Code Label	23599	or <input type="checkbox"/> Correspondence address below
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		Zip Code _____
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Name (Print/Type)	Richard M. Lebovitz	Registration No. (Attorney/Agent)	37.067
Signature		Date	December 5, 2003

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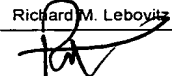
**FEE TRANSMITTAL  
for FY 2001**

Patent fees are subject to annual revision.

**TOTAL AMOUNT OF PAYMENT** (\$) 412.00**Complete if Known**

Application Number	Divisional of 09/830,189
Filing Date	December 5, 2003
First Named Inventor	Heike PAHL
Examiner Name	E. Kemmerer
Group / Art Unit	1646
Attorney Docket No.	LEDER-0001-D01

<b>METHOD OF PAYMENT (check one)</b>		<b>FEE CALCULATION (continued)</b>	
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:  Deposit Account Number: 13-3402  Deposit Account Name: Millen, White, Zelano & Branigan, P.C. <input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		<b>3. ADDITIONAL FEES</b>	
2. <input checked="" type="checkbox"/> Payment Enclosed: <input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other			
<b>FEE CALCULATION</b>			
1. BASIC FILING FEE			
Large Entity Fee Code	Small Entity Fee Code	Fee Description	Fee Paid
1001 770 2001 385		Utility filing fee	385.00
1002 340 2002 170		Design filing fee	
1003 530 2003 265		Plant filing fee	
1004 770 2004 385		Reissue filing fee	
1005 160 2005 80		Provisional filing fee	
SUBTOTAL (1)			(\$ 385)
2. EXTRA CLAIM FEES			
Total Claims	23	-20**	=
Independent Claims	3	-3**	=
Multiple Dependent			
Large Entity Fee Code	Small Entity Fee Code	Fee Description	Fee Paid
1202 18 2202 9		Claims in excess of 20	
1201 86 2201 43		Independent claims in excess of 3	
1203 290 2203 145		Multiple dependent claim, if not paid	
1204 86 2204 43		** Reissue independent claims over original patent	
1205 18 2205 9		** Reissue claims in excess of 20 and over original patent	
SUBTOTAL (2)			(\$ 27.00)
**or number previously paid, if greater; For Reissues, see above			
		Other fee (specify) _____	
		*Reduced by Basic Filing Fee Paid	
		SUBTOTAL (3)	
		(\$ 0)	

<b>SUBMITTED BY</b>		<b>Complete (if applicable)</b>			
Name (Print/Type)	Richard M. Leboyitz	Registration No. Attorney/Agent	37,067	Telephone	(703) 243-6333
Signature		Date	December 5, 2003		

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